SUMMARY

NURSING HOME STAFFING IMPROVEMENT ACT OF 2002

BACKGROUND

In November 1990, Congress mandated that the Department of Health and Human Services (HHS) conduct a study "on the appropriateness of establishing minimum caregiver to resident ratios and minimum supervisor to caregiver ratios for skilled nursing facilities . . . and shall include in such study recommendations regarding appropriate minimum ratios." In March 2002, HHS provided Congress with the results of its study. HHS researchers concluded that 90% of nursing homes have staffing levels that are too low to provide adequate care. The researchers also identified specific minimum staffing levels that would improve the quality of care received by nursing home residents. The Bush Administration has chosen not to implement these much needed minimum staffing levels which would substantially improve nursing home care, even going so far as to limit public distribution of the study.

In order to ensure that this important research is not ignored, the Nursing Home Staffing Improvement Act of 2002 would establish the minimum nurse staffing levels that have been identified by HHS researchers. These staffing levels will go a long way in ensuring that the 1.5 million residents of our nation's nursing homes receive the quality of care that they deserve.

MANDATORY NURSE STAFFING LEVELS

The bill requires that nursing homes comply with HHS-identified staffing levels for registered nurses, licensed nurses, and certified nurse aides. These staffing levels would require that all nursing home residents receive between 4.1 and 4.85 hours of nursing care each day. Under the bill, these staffing levels must be achieved within two years after the date of enactment, except that if the HHS Secretary determines that a two-year implementation period is not feasible, he can delay implementation until five years after the date of enactment.

INCREASED FUNDING

The bill increases resources to nursing homes to comply with these staffing levels. The bill reinstates the "Boren Amendment," which, until its repeal by Congress in 1997, guaranteed "reasonable and adequate" Medicaid reimbursements for providing quality care. The bill also helps fund the additional staffing by increasing the federal Medicaid match to states for payment of health care services by 1.5%. In order to ensure that the increased federal resources are being used to hire additional nursing staff, the bill authorizes state inspectors to examine the financial records of nursing homes.